

Letter of Reference

Application for TESL Diploma Admission

Department of Educational Psychology, University of Alberta

Applicant: Complete area below before sending this form to your referee.

Last Name	First and Middle Name(s)
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Referee: We are interested in the applicant's abilities of advanced study, teaching ability, potential for successful study in the applicant's field as well as weaknesses, if any. We would appreciate knowing the basis for your statements. Please return directly to The Department of Educational Psychology, 6-1-2 Education North, University of Alberta, Edmonton, AB, Canada T6G 2G5

1. General Appraisal

2. Knowledge of Applicant: In what capacity/ -how long have you known the applicant (e.g., as teacher, supervisor, or employer)?

I was the applicant's _____ for ___ years and/or ___ months between the years ___ and _____. In my opinion, of the ___ (number) individuals in this category (i.e., student, employee, etc.) I have supervised/dealt with in the last five years, I would rank this person in the upper ___ percent.

3. Ability in the English Language: Please comment on the applicant's ability to comprehend spoken English, to teach in English, and to pursue a research problem and write a scholarly report or thesis in English.

4. Specific Abilities: For each category check the most appropriate circle.

	Outstanding (top 5%)	Superior (top 15%)	Good (top 25%)	Average (top 50%)	Marginal (lower 50%)	Inadequate opportunity to observe
Academic Achievement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Scholarly Promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Teaching Potential/Promise	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Verbal Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Writing Skills	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Industriousness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Judgement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall Rating	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

5. Referee

Name		Position?Acadmeic Rank	E-mail Address
Institution		Address and Postal Code	
Telephone Number	Date	Signature of Referee	

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